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| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL  |  | Attorney Docket No. M4065.0317/P317-B   |  |
|---|--|---|--|
|   |  | First Inventor David J. Corisis   |  |
|   |  | Title SEMICONDUCTOR PACKAGE   |  |
| (Only for new nonprovisional applications under 37 CFR 1.53(b))   |  | Express Mail Label No.  |  |
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents.   |  | <b>ADDRESS TO:</b> Box Patent Application<br>Commissioner for Patents<br>Washington, DC 20231   |  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original, and a duplicate for fee processing)   |  | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)  |  |
| 2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27  |  | 8. Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary)   |  |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 14]<br>(preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table,<br/>or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> |  | a. <input type="checkbox"/> Computer Readable Form (CRF)  |  |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6]  |  | b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper   |  |
| 5. Oath or Declaration [Total Pages 1]<br>a. <input type="checkbox"/> Newly executed (original or copy)<br>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br>(for continuation/divisional with Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting<br>inventor(s) named in the prior application,<br>see 37 CFR 1.63(d)(2) and 1.33(b).   |  | c. <input type="checkbox"/> Statements verifying identity of above copies   |  |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76   |  | <b>ACCOMPANYING APPLICATIONS PARTS</b>  |  |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application<br>Data Sheet under 37 CFR 1.76<br><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. 09/731,803<br>Prior application information: Examiner D. Collins Group / Art Unit: 2823  |  | 9. <input checked="" type="checkbox"/> Assignment Papers  |  |
| For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied<br>under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by<br>reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  |  | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of<br>Attorney  |  |
| <b>19. CORRESPONDENCE ADDRESS</b>   |  | 11. <input type="checkbox"/> English Translation Document (if applicable)   |  |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label   |  | 12. <input checked="" type="checkbox"/> Information Disclosure<br>Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS<br>Citations  |  |
| 24998   |  | 13. <input checked="" type="checkbox"/> Preliminary Amendment   |  |
| Name DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP<br>Thomas J. D'Amico  |  | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)   |  |
| Address 2101 L Street NW  |  | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)   |  |
| City Washington State DC Zip Code 20037-1526  |  | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent.  |  |
| Country US Telephone (202) 785-9700 Fax (202) 887-0689  |  | 17. <input checked="" type="checkbox"/> Other: Submission of Formal Drawings; Formal<br>Drawings (6 sheets); Submission of POA;<br>POA by Assignee and Certificate under 37<br>C.F.R. § 3.73(b) |  |
| Name (Print/Type) Thomas J. D'Amico   |  | Registration No. (Attorney/Agent) 28,371  |  |
| Signature [Signature]   |  | Date January 14, 2002   |  |

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| FEE TRANSMITTAL<br>for FY 2002   |  | Complete if Known    |                              |
|--|--|----------------------|------------------------------|
| Patent fees are subject to annual revision.                                      |  | Application Number   | Not Yet Assigned-Conf. #1777 |
|  |  | Filing Date          | January 14, 2002             |
|  |  | First Named Inventor | David J. Corisis             |
|  |  | Examiner Name        | D. Collins                   |
|  |  | Group Art Unit       | 2823                         |
|  |  | Attorney Docket No.  | M4065.0317/P317-B            |
| <input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27 |  |                      |                              |
| TOTAL AMOUNT OF PAYMENT (\$)   |  | 992.00               |                              |

  

| METHOD OF PAYMENT (check all that apply)  | FEE CALCULATION (continued)   |              |              |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
|---|---|--------------|--------------|--|-----------------|-----------------|----------|----------|----------|----------|----------|-----|-----|-----|--------------------|-------------------------------------|-----|-----|-----|-----|-------------------|--|-----|-----|-----|-----|------------------|---------------------------|-----|-----|-------|-----|--------------------|---|-----|-----|------|-----|------------------------|--|--------------|-----|--------|-----|--------|---|--------------|-----|--------------|-----|-----------------|--|----------|----------|----------|----------|-----|---|-----|-----|------------------------|-----|-----|--|-----|-----|-----------------------------------|-----|-----|---|-----|-----|---------------------------------------|-----|-----|--|-----|-----|--|-----|-----|------------------|-----|-----|--|-----|--------------|--|--|-----|------|--------|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|-------------------------------------|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------|--|--|--|--|--|-----------------------------------|--|--|--|--------------|------|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account<br>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">04-1073</span><br>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Dickstein Shapiro Morin &amp; Oshinsky LLP</span><br>The Commissioner is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  | <h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr> <td colspan="4">Other fee (specify)</td> <td></td> <td></td> </tr> <tr> <td colspan="4">*Reduced by Basic Filing Fee Paid</td> <td>SUBTOTAL (3)</td> <td>0.00</td> </tr> </tbody> </table> | Large Entity |              | Small Entity   |                 | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath |     | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130 | 139 | 130              | Non-English specification |     | 147 | 2,520 | 147 | 2,520              | For filing a request for ex parte reexamination |     | 112 | 920* | 112 | 920*                   | Requesting publication of SIR prior to Examiner action |              | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |              | 115 | 110          | 215 | 55              | Extension for reply within first month |          | 116      | 400      | 216      | 200 | Extension for reply within second month |     | 117 | 920                    | 217 | 460 | Extension for reply within third month |     | 118 | 1,440                             | 218 | 720 | Extension for reply within fourth month |     | 128 | 1,960                                 | 228 | 980 | Extension for reply within fifth month |     | 119 | 320  | 219 | 160 | Notice of Appeal |     | 120 | 320  | 220 | 160          | Filing a brief in support of an appeal |  | 121 | 280  | 221    | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37CFR 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  | SUBTOTAL (3) | 0.00 |
| Large Entity  |   | Small Entity |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| Fee Code  | Fee (\$)  | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 105   | 130   | 205          | 65           | Surcharge - late filing fee or oath  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 127   | 50  | 227          | 25           | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 139   | 130   | 139          | 130          | Non-English specification  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 147   | 2,520   | 147          | 2,520        | For filing a request for ex parte reexamination                            |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 112   | 920*  | 112          | 920*         | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 113   | 1,840*  | 113          | 1,840*       | Requesting publication of SIR after Examiner action                        |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 115   | 110   | 215          | 55           | Extension for reply within first month                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 116   | 400   | 216          | 200          | Extension for reply within second month                                    |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 117   | 920   | 217          | 460          | Extension for reply within third month                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 118   | 1,440   | 218          | 720          | Extension for reply within fourth month                                    |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 128   | 1,960   | 228          | 980          | Extension for reply within fifth month                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 119   | 320   | 219          | 160          | Notice of Appeal   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 120   | 320   | 220          | 160          | Filing a brief in support of an appeal                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 121   | 280   | 221          | 140          | Request for oral hearing   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 138   | 1,510   | 138          | 1,510        | Petition to institute a public use proceeding                              |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 140   | 110   | 240          | 55           | Petition to revive - unavoidable   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 141   | 1,280   | 241          | 640          | Petition to revive - unintentional   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 142   | 1,280   | 242          | 640          | Utility issue fee (or reissue)   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 143   | 460   | 243          | 230          | Design issue fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 144   | 620   | 244          | 310          | Plant issue fee  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 122   | 130   | 122          | 130          | Petitions to the Commissioner  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 123   | 50  | 123          | 50           | Processing fee under 37 CFR 1.17(q)  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 126   | 180   | 126          | 180          | Submission of Information Disclosure Stmt                                  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 581   | 40  | 581          | 40           | Recording each patent assignment per property (times number of properties) |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 146   | 740   | 246          | 370          | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 149   | 740   | 249          | 370          | For each additional invention to be examined (37CFR 1.129(b))              |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 179   | 740   | 279          | 370          | Request for Continued Examination (RCE)                                    |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 169   | 900   | 169          | 900          | Request for expedited examination of a design application                  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| Other fee (specify)   |   |              |              |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| *Reduced by Basic Filing Fee Paid   |   |              |              | SUBTOTAL (3)   | 0.00            |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| <h3 style="margin: 0;">1. BASIC FILING FEE</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>740.00</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4">SUBTOTAL (1)</td> <td>(\$)</td> <td>740.00</td> </tr> </tbody> </table> <h3 style="margin: 0;">2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4">SUBTOTAL (2)</td> <td>(\$)</td> <td>252.00</td> </tr> </tbody> </table> <p style="font-size: 0.7em;">**or number previously paid, if greater; For Reissues, see above</p> | Large Entity  |              | Small Entity |  | Fee Description | Fee Paid        | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 101      | 740 | 201 | 370 | Utility filing fee | 740.00                              | 106 | 330 | 206 | 165 | Design filing fee |  | 107 | 510 | 207 | 255 | Plant filing fee |                           | 108 | 740 | 208   | 370 | Reissue filing fee |   | 114 | 160 | 214  | 80  | Provisional filing fee |  | SUBTOTAL (1) |     |        |     | (\$)   | 740.00  | Large Entity |     | Small Entity |     | Fee Description | Fee Paid                               | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 103 | 18                                      | 203 | 9   | Claims in excess of 20 |     | 102 | 84                                     | 202 | 42  | Independent claims in excess of 3 |     | 104 | 280                                     | 204 | 140 | Multiple dependent claim, if not paid |     | 109 | 84                                     | 209 | 42  | ** Reissue independent claims over original patent |     | 110 | 18               | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     | SUBTOTAL (2) |  |  |     | (\$) | 252.00 |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| Large Entity  |   | Small Entity |              | Fee Description  |                 |                 | Fee Paid |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| Fee Code  | Fee (\$)  | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 101   | 740   | 201          | 370          | Utility filing fee   | 740.00          |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 106   | 330   | 206          | 165          | Design filing fee  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 107   | 510   | 207          | 255          | Plant filing fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 108   | 740   | 208          | 370          | Reissue filing fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 114   | 160   | 214          | 80           | Provisional filing fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| SUBTOTAL (1)  |   |              |              | (\$)   | 740.00          |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| Large Entity  |   | Small Entity |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| Fee Code  | Fee (\$)  | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 103   | 18  | 203          | 9            | Claims in excess of 20   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 102   | 84  | 202          | 42           | Independent claims in excess of 3  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 104   | 280   | 204          | 140          | Multiple dependent claim, if not paid                                      |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 109   | 84  | 209          | 42           | ** Reissue independent claims over original patent                         |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| 110   | 18  | 210          | 9            | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |
| SUBTOTAL (2)  |   |              |              | (\$)   | 252.00          |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |      |     |                        |  |              |     |        |     |        |   |              |     |              |     |                 |  |          |          |          |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |   |     |     |                                       |     |     |  |     |     |  |     |     |                  |     |     |  |     |              |  |  |     |      |        |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |              |      |

  

| SUBMITTED BY      |                   | Complete (if applicable)          |                  |
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Docket No.: M4065.0317/P317-B  
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
David J. Corisis

Application No.: Not Yet Assigned

Group Art Unit: 2823

Filed: January 14, 2002

Examiner: D. Collins

For: SEMICONDUCTOR PACKAGE

SUBMISSION OF FORMAL DRAWINGS

Commissioner for Patents  
Washington, DC 20231

Dear Sir:

Submitted herewith is one set (six sheets, figures 1-6C) of formal drawings for filing in the above-identified Patent application. Kindly substitute the enclosed formal drawings for the informal drawings submitted with the originally filed application.

Dated: January 14, 2002

Respectfully submitted,

By 

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